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SEC 1972 Potential persons who are to respond to the collection of information contained in this form are not (6/99)required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2002 Estimated average burden hours per response.. . 1

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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DAT	E RECEI	VED	

Name of Offering (check if this is an amendment and name has changed, and indicate change.)

HYDROGENICA PARTNERS, L.P.

Filing	Under	(Check	box((es)	that
apply)	:				

[] Rule 504

[] Rule 505

[X] Rule 506

[] Section 4(6)

Type of Filing: [X] New Filing [] Amendment

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; Each general and managing partner of partnership issuers. Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [X] General and/or Managing Partner Full Name (Last name first, if individual) Bermingham, Andrew W. Business or Residence Address (Number and Street, City, State, Zip Code) 518 Seventeenth Street, 17th Floor, Denver, Colorado 80202 [] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Andrew W. & John R. Bermingham Revocable Trust Business or Residence Address (Number and Street, City, State, Zip Code) 1991 East Alameda Avenue, #9, Denver, Colorado 80209 Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner Full Name (Last name first, if individual) Suter, Christian Business or Residence Address (Number and Street, City, State, Zip Code) Des Gouttes & Associés, 4, avenue de Champel, CH-12061, Genève, Switzerland Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner Full Name (Last name first, if individual)

c/o Edgewood Management Company, 350 Park Avenue, New York, New York 10022

Turnstone Ventures, L.P.

Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. INFO	RMATIC	N ABO	JT OFFE	RING			
1. Has	the issuer	sold, or c	loes the is	suer inten	d to sell, t	o non-accr	edited inve	estors in thi	s offering?		
				Answer	also in App	oendix, Co	lumn 2, if f	iling under	ULOE.		
2. Wha	at is the mi	inimum in	vestment t	hat will be	accepted	from any i	ndividual?.				
3. Doe	s the offer	ing permit	joint own	ership of a	single un	it?					
commi person states,	ssion or si to be liste list the na	milar remed is an as one of the	uneration sociated publication	for solicita person or a dealer. If	tion of pur agent of a more than	chasers in broker or of five (5) pe	connection dealer regis	stered with e listed are	s of securit the SEC a	ies in the o	offering. If a a state or
Full Na	me (Last	name first	, if individ	ıal)							
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Name	of Associa	ited Broke	r or Deale	r							
	in Which I					Solicit Pu	ırchasers			()	All States
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Busine	ss or Res	idence Ad	dress (Nu	mber and	Street, Cit	y, State, Z	ip Code)				
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W]	[WY]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

\$ 920,000

Payments to

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Officers, Directors, & Affiliates	Payments To Others
Salaries and fees	[]\$	[]\$
Purchase of real estate	[]\$	[]\$ 920,000
Purchase, rental or leasing and installation of machinery and equipment	[]\$	[]\$
Construction or leasing of plant buildings and facilities	[]\$	[]\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$	[]\$
Repayment of indebtedness	[]\$	[]\$
Working capital	[]\$	[]\$
Other (specify):	[]\$	[]\$
	[]\$	[]\$
Column Totals	[]\$	[]\$920,000
Total Payments Listed (column totals added)	[]\$ <u>9</u>	20,000

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature 1	Date
Hydrogenica Partners, L.P.	Moraninan	MAR 27 January, 2002
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Andrew W. Bermingham	Sole Member of Hydrogenica Ca Partner of Hydrogenica Partners	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE 1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? Yes No [] [X]

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature (Date
Hydrogenica Partners, L.P.	An munusuum	MQ2 27 J anuar y, 2002
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Andrew W. Bermingham	Sole Member of Hydrogenica Capital Partners Partner of Hydrogenica Partners, L.P.	LLC, the General

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2		3			4		5		
					Disqualification					
	Intend t	o sell	Type of security and aggregate						under State ULOE (if yes, attach	
	to non-acc	credited	offering price		Type of	investor and		explanation of		
	investors (Part B-I		offered in state (Part C-Item 1)		amount pur	rchased in State C-Item 2)		waiver gr	waiver granted) (Part E-Item 1)	
-	(Pail D-i	I	(Fait C-item 1)	Number of	(Fail	Number of	T T	(Fail E-i	tem i)	
			Partnership Interests	Accredited		Non-Accredited				
State	Yes	No	\$950,000	Investors	Amount	Investors	Amount	Yes	No	
AL		X	X	1	\$50,000	1/				
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